

LICENSED DIRECT-ENTRY MIDWIFE BOARD
MINUTES
OCTOBER 6, 2006
ROOM 474 HEBER M. WELLS BUILDING
160 E 300 S SALT LAKE CITY UTAH

CONVENED:	11:00 a.m.
CONDUCTING:	Suzanne Smith
ADJOURNED:	1:03 p.m.
MEMBERS PRESENT:	Suzanne Smith Heather Johnston Vivian Giles Krista Black (by telephone)
MEMBERS EXCUSED:	Holly Richardson
DIVISION STAFF:	Laura Poe, Executive Administrator Craig Jackson, Division Director Shirlene Kimball, Secretary
GUESTS:	Susan Padilla Michelle McOmber, UMA

TOPIC OF DISCUSSION:

AUGUST 11, 2006 MINUTES:
REVIEW INFORMATION FOR THE
REPORT TO THE HEALTH AND HUMAN
SERVICES INTERIM COMMITTEE:

DECISIONS/RECOMMENDATIONS:

Approved as written.
Board members reviewed the data from the 10 licensed midwives. The report will include transfers of care; subsequent cesarean sections; breeches, twins and VBACs; the use of pitocin; episiotomies; newborn complications and maternal complications. It was also determined that APGAR scores be included taken at 1 minute. 5 minute APGAR scores can also be included on the report. The information received did not include data on clients who transferred out of the LDEM's care prior to the onset of labor because the Board had not determined this information was necessary. However, this information will be collected in the future.

The report is as follows: There were 94 laboring mothers. Of the 94 clients, 6 were transferred to the hospital prior to the birth of the baby and all transfers were by car. Three mothers were transferred after delivery for hemorrhage. Two transfers were by ambulance and one by car. Two of the three hemorrhages were stopped by the midwife prior to transfer and the transfer was for IV fluid. The other one required a D&C. All mothers responded well and were released. One baby was transferred immediately after birth by

ambulance. After review and treatment by doctors, it was determined that the infant had suffered oxygen deprivation sometime within two weeks of delivery. In 9 of the 10 transfers, the outcomes were good for both mother and babies with no residual problems at either 4 hours post-delivery or six weeks post-delivery.

Of the 94 laboring women, 2 were later delivered by c-section in the hospital. Both outcomes were excellent.

Of the 94 clients, four babies were breech; there were 2 sets of twins; and two deliveries were VBAC. One of the breech babies was discovered during labor and the client requested transfer to the hospital where the mother underwent a c-section. The rest were delivered by the LDEM with excellent outcomes.

Of the clients under LDEM care who did not transfer prior to birth, 11% received Pitocin to stop a postpartum hemorrhage. Two of these mothers were transferred for IV fluids and one

was transferred for a D&C. There were no residual problems by six weeks postpartum.

No episiotomies were performed by the LDEM's in this data collection.

Of the 90 babies born, all but 2 had an APGAR score of 7 or better at five minutes, with 85% scoring 9 or 10. One baby that scored 4 at five minutes had scored 8 at one minute, but between 1 and 5 minutes developed a clump of mucous in his airway, but once discovered and cleared, he recovered quickly. The other baby who scored 5 was transferred.

There were three babies who had residual problems at six weeks. One baby was discussed earlier and had suffered oxygen deprivation. One baby had an unusual presentation of Down's Syndrome; and the other was being

followed for suspicion of Long QT Syndrome.

There were four mothers who had infections after delivery. Two of these mothers had been transferred to the hospital prior to delivery and acquired a urinary tract infection from the catheter inserted at the hospital. Two other mothers acquired a yeast infection and urinary tract infection from catheter insertion at home.

Ms. Poe indicated that one concern expressed has been the length of labor. There is concern that the mother is laboring too long before being transferred to the hospital. Board members indicated it would be hard to track the length of labor because there

are so many variables. However, the report will track labors exceeding 24 hours.

Ms. Poe reported that the Health and Human Services Interim Committee meeting is scheduled for November 15, 2006. A written report will be provided prior to that date, and if requested, the Board chair may be invited to meet with the Committee.

Ms. Johnston made a Motion to have Ms. Smith draft the narrative and have Ms. Richardson approve the draft. Ms. Giles seconded the Motion. All Board members in favor.

ELIZABETH SMITH, APPLICATION FOR
LICENSURE:

The application was reviewed. Ms. Giles made a Motion to approve Ms. Smith for licensure. Ms. Johnston seconded the Motion. Ms. Black abstained. All other Board members in favor.

ANNUAL TRAINING ON THE OPEN AND
PUBLIC MEETINGS ACT:

The training will be tabled until the next meeting.

REVIEW 2007 BOARD MEETING

Board meetings will be held January 12, 2007;

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SCHEDULE:

April 13, 2007; July 13, 2007 and October 12, 2007.

LICENSED DIRECT ENTRY MIDWIFE
RULES:

The Rules went into effect September 14, 2006

UPDATE REGARDING LICENSURE
PROCESS AND NUMBERS:

Ms. Poe reported there are currently 12 LDEMs licensed. There will be 13 after the Division licenses Elizabeth Smith. Board members indicated just about all the active practitioners who want to be licensed are licensed. The only additional ones will be the new students, which should be no more than four each year.

DISCUSSION REGARDING SUMMARY
SHEET FOR THE 2007 REPORT:

Ms. Johnston suggested writing a summary sheet and instructions for next year so the LDEM's will know what is needed for the report. She also suggested putting the spread sheet on the web site. A few changes will be made to the spreadsheet, such as transfer waivable and transfer mandatory, total transferred and at what point of time the client was transferred. The instructions would be included on the web site.

DISCUSSION FOR THE JANUARY
MEETING:

Ms. Black indicated she would like to discuss outreach education. This can be placed on the January agenda for discussion as well as discussion regarding future goals. Other agenda items would be the Open and Public meetings training and to finalize the spreadsheet.

SUZANNE SMITH, ACTING CHAIR

DATE

LAURA POE, EXECUTIVE
ADMINISTRATOR

DATE